



USAID | BOLIVIA

FROM THE AMERICAN PEOPLE

Issue Date: August 22, 2008
Closing Date: September 8, 2008
Closing Time: 4:30 PM, La Paz time

SUBJECT: REQUEST FOR PROPOSALS NO. 511-08-022
USAID/BOLIVIA HEALTH PROGRAM – PUBLIC
INFORMATION INITIATIVE

Dear Sir/Madam:

The United States Government (USG), represented by the U.S. Agency for International Development's Mission in Bolivia (USAID/Bolivia), is considering awarding a fixed price contract to obtain the results described in the attached statement of work. This form of contract requires the contractor to complete and deliver the specified end results within the final negotiated price.

This is a combined Synopsis/Solicitation for commercial items prepared in accordance with the format in FAR Subpart 12.6-Streamlined Procedures for Evaluation and Solicitation for Commercial Items- as supplemented with additional information included in this notice. This announcement constitutes the only solicitation; proposals are being requested and a written solicitation will not be issued.

This solicitation is a Request for Proposals (RFP). This acquisition is unrestricted and all interested offerors may submit a quote. If your firm is interested, please provide the AAO Office with your proposal for accomplishing this work at your earliest opportunity, but no later than the above RFP closing date. Your proposal should contain two sections in the following format:

Cost Proposal consisting of:

1. A detailed cost proposal divided, as appropriate, into the following or similar elements: personnel compensation, indirect costs, travel and per diem costs, other direct costs, etc. Please ensure that you include a fully detailed explanation of the basis for each line item category that you propose.
2. Biographical Data Sheets (Form AID 1420-17 - attached) must be submitted for all proposed personnel and contain verified salary history for the previous three years. Both the individual proposed and the employer must sign bio-data forms.
3. An organizational Conflicts of Interest Representation (format attached).

4. A certification that no USAID employee has recommended the use of an individual for use under the proposed contract whom was not initially located and identified by your organization.
5. Key Individual Certification - Narcotics Offenses and Drug Trafficking.

Technical Proposal shall consist of:

1. Your analysis of and detailed proposal for accomplishing the proposed scope of work.
2. A detailed description of technical activities to be executed to achieve the results included in the previous point.
3. Curriculum Vitae for each person proposed involved in this Task.
4. Your proposed time schedule for accomplishing the work, and
5. Any additional information and/or references, which will assist us in determining that your organization has the capability to perform the proposed assignment.

The attached proposed Scope of Work basically outlines what USAID expects to be addressed in the task, however, future minor adjustments might be incorporated, therefore, the final Scope of Work will be included in the official Contract. It's also worth noting that you are free to suggest any changes you deem pertinent to the Statement of Work, our estimated timeline and or the team composition.

Your response should also include the earliest date you estimate you will be available to start the consultancy should you be selected.

Applicable Clauses

The clause at FAR 52.212-4, Contract Terms and Conditions - Commercial Items, applies to this acquisition.

The clause at FAR 52.212-5, Contract Terms and Conditions Required to Implement Statutes or Executive Orders - Commercial Items, applies to this acquisition. The following additional FAR clauses cited in this clause are applicable: 52.222-3, 52.222-19, 52.222-21, 52.222-26, 52.222-35, 52.222-36, 52.222-37, 52.225-1, 52.225-13 and 52.232-33. Clauses are incorporated by reference and apply to this solicitation. Clauses can be obtained at

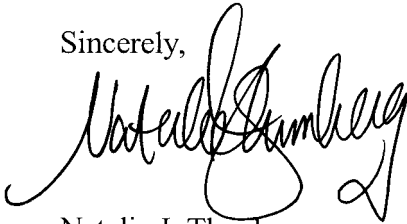
I would appreciate being notified immediately if you are unable and/or not interested at this time in submitting a proposal for this work.

Please keep in mind that this RFP in no way obligates USAID to award you a contract nor does it commit the U.S. Government to pay any cost incurred in the preparation and submission of the foregoing. Do not incur any expense or begin work until notified to do so, in writing, by the Contracting Officer.

Questions and Answers the deadline for receiving questions is August 27, 2008. Questions may be submitted to the following e-mail address aaoproposals@usaid.gov. Oral instructions, answers or guidance from whatever USAID source prior to the award of the contract shall not be binding.

This letter in no way obligates USAID to award you an order nor does it commit the U.S. Government to pay any cost incurred in the preparation and submission of the foregoing. Do not incur any expense until notified to do so, in writing, by the Supervisory Contracting Officer.

Sincerely,



Natalie J. Thunberg
Contracting Officer

Attachment: Statement of Work
Key Individual Certifications Narcotics Offenses and Drug Trafficking
Organization Conflicts of Interest Representation
Evaluation Criteria

STATEMENT OF WORK

USAID/BOLIVIA HEALTH PROGRAM PUBLIC INFORMATION INITIATIVE

I. Background

USAID supports the Government of Bolivia's emphasis on community health as a key element in improving the quality of life for the country's most disadvantaged populations. Accordingly, USAID collaborates with the Ministry of Health and with local and international organizations to improve access to quality health services for Bolivia's rural and peri-urban poor. The Program directly supports the *Bolivia Digna* pillar of the Bolivian Government's National Development Plan.

A. Program Objective and Result Areas

USAID/Bolivia's objective in the health sector is to improve the health of Bolivians, contributing to their quality of life. The program strives to achieve three key results:

- 1) Increased ability of individuals, families and communities to take action to improve health.

Within the framework of the Ministry of Health's Policy for Family, Intercultural and Community Health, USAID's community-level interventions focus on rural and other underprivileged populations with the goal of helping individuals, families and communities recognize the value of making their own health a priority. The program promotes healthy behaviors, provides basic services through community health agents, and strengthens community capacity to identify, prioritize and develop innovative solutions to local health problems. Activities are raising immunization coverage; expanding access to maternal and child health services and reproductive health care; improving family nutrition and responsiveness to pregnancy complications; and reducing the number of new cases of Chagas, respiratory illnesses, and diarrheal disease.

- 2) Expanded Delivery of Quality, High-impact Services through Community and Private Health Networks

Activities under this result are designed to build bridges between health service providers and the communities they serve by improving the capacity of health providers to address community health needs. USAID provides training to public sector and NGO health workers in maternal and child health, reproductive health, family planning, and control of infectious diseases. In addition, USAID provides technical assistance to improve supervision, clinical procedures, bio-safety, and the quality and efficiency of services. USAID's support for HIV/AIDS/STI

prevention and control activities is helping to keep the national HIV prevalence rate below one percent.

3) Strengthened Institutional Capacity for Health Care Management and Sustainability

To achieve the fundamental long-term goal of building capacity to maintain, replicate and sustain health system improvements, USAID provides technical assistance to strengthen the managerial capacity of national, regional, and local authorities in target areas. In addition, USAID provides support for the national health information system, the pharmaceutical and commodity logistics system, the reference laboratory network, and the epidemiological surveillance system in order to improve capacity to collect and use information and to plan appropriate interventions.

The Health Program also supports a number of Bolivian NGOs in their efforts to achieve financial sustainability so that they may continue offering health services to underserved populations across the country.

B. Implementing Partners

Activities are implemented primarily by three Bolivian non-governmental organizations: PROCOSI, CIES, and PROSALUD (which has two projects -- one that supports direct service delivery in PROSALUD's clinics and another titled "Socios Para el Desarrollo".) International NGO partners include John Snow International, the Manoff Group, and Save the Children.

C. Technical Intervention Areas

USAID's partners are currently carrying out activities related to:

- Family planning/reproductive health
- Maternal and child health
- Tuberculosis
- HIV/AIDS
- Chagas

In the past, the program also supported activities in:

- Avian Influenza
- Malaria

D. Selected Accomplishments

Recent accomplishments of the USAID/Bolivia health program include:

- PROSALUD and CIES, Bolivian NGOs receiving USAID support for service delivery and institutional capacity building, conduct over 930,000 health consultations per year in their 39 health centers and mobile units in eight of Bolivia's nine departments.
- PROCOSI, a network of 32 local and international NGOs, works in 40 municipalities of Bolivia, facilitating access to quality services for over 850,000 people.
- In support of the National Chagas Prevention Program, USAID has helped rebuild or refurbish over 12,000 homes in areas affected by the disease.
- Support to ten national HIV/AIDS surveillance and reference centers is improving the diagnosis and treatment of sexually transmitted infections and increasing access to voluntary HIV counseling and testing services.
- In FY07, 41,882 children were immunized with the third dose of the Pentavalente vaccine, achieving 93% coverage of the target population in program intervention areas.

E. Rationale for Public Information Initiative

There is a strong need to communicate the mission's important role in strengthening the health sector and improving delivery of health services through a number of channels and to numerous audiences. This increased awareness and understanding plays a key role in ensuring that health activities result in improved health behaviors and outcomes by educating the public about the availability of health services and promoting their use. Although the USAID/Bolivia health program has had notable achievements, these are often not effectively communicated to key audiences. Reasons for this lack of effective communication include geographic dispersion of program sites, relative remoteness of some program sites for events/field visits, and the occasional desire of partners to keep a low profile. Mainly, however, the lack of products/events stems from lack of a clear plan for reaching and informing target audiences of program accomplishments and low capacity/lack of time within partners and USAID/Bolivia to implement public information activities.

F. Duration of Award

The award is expected to begin by October 2008 and continue through September 2010. The planned contract ceiling is \$200,000 for two years, with a planned first-year obligation of \$100,000.

II. Scope of Work

A. Objective

The objective of this award is increased awareness and understanding of USAID-supported health achievements among key institutional actors and the Bolivian population at large. A critical assumption is that this increased awareness and understanding plays a key role in

ensuring that health activities result in improved health behaviors and outcomes by educating the public about the availability of health services and promoting their use. The purpose of the award is to design, produce, and execute (in conjunction with Health Office implementing partners) a pro-active and well-targeted public information plan to share health information and program successes, as well as to highlight how USAID's health program supports Ministry of Health priorities and programs, in easily understood language and formats suitable to the range of target audiences. This initiative is expected to complement and improve the existing communication efforts of USAID/Bolivia's Health Strategic Objective Team (HSOT) and its implementing partners.

B. Illustrative Tasks

1. Develop a Public Information Plan

The contractor will develop a comprehensive and detailed plan for achieving the objectives and purpose stated above. This will entail meetings with USAID (HSOT and Program Office) and HSOT partners, as well as reviewing any documentation developed by HSOT partners re: communication activities. The plan will provide an overarching framework for the development and communication of targeted, coherent, and consistent messages about HSOT-supported health achievements. Among other content, the plan will include specific target audiences, communications products and approaches, deadlines, and responsible entities for each proposed activity in the plan. An illustrative monitoring and evaluation plan should also be included.

As steps in developing the plan, the Contractor will establish the baseline level of awareness of USAID health activities among target audiences and conduct a rapid review and gap analysis of current HSOT and implementing partner communications/public information activities. The purpose of the review/gap analysis is to identify and refine target audiences, understand the scope of on-going activities, recommend how currently planned activities could be improved, and determine what more needs to be done. Given that the majority of HSOT partners work with USAID through cooperative agreement mechanisms, any recommendations for modifications to the partner communications plans should be channeled through USAID so that they can be shared with the partner as part of USAID's substantial involvement in the agreements.

2. Implement the Plan

Contingent on approval of the plan by USAID, the contractor will begin implementation. In many cases, the contractor may not be in the lead, but rather will assist HSOT partners. Given that much of the HSOT's work occurs outside of La Paz, the creation of products and/or implementation of events may entail travel. The contractor will also be required to maintain capacity to respond (at times on short notice) to requests from the USAID/Bolivia HSOT for public information products or public events that were not anticipated as part of the strategy. Depending on the event, the Contractor's responsibilities may include development and

dissemination of press releases and background information, managing protocol issues, site selection and preparation, staging and logistical issues, scheduling and contact with speakers, coordinating initiatives with appropriate USG and local government officials and media, and on-site coordination of media.

3. Monitor and Evaluate the Success of the Plan

Monitoring and evaluation may entail pre- and post-activity surveys, interviews with key stakeholders, and monitoring local press coverage and opinion concerning USAID health programs for the purpose of gauging the effect of the public information plan. An illustrative monitoring and evaluation plan including suggested indicators will be proposed in the public information plan, and negotiated with and agreed to by USAID during contract negotiation. Illustrative indicators might include the number of events undertaken, the number of press stories reporting favorably on USAID-supported activities, knowledge of positive health behaviors, etc.

C. Qualifications for the Contractor's Team

The contractor must be able to begin work on developing the plan and be prepared to support high priority outreach products or events immediately upon signing the contract. The contractor's staff must have demonstrated technical expertise in the development and presentation of technical information to non-technical audiences for the purpose of showcasing USAID/Bolivia's health programs. The contractor must be familiar with Bolivian and international media outlets and must be able to make appropriate decisions regarding each one of the deliverables. The contractor must be able to plan and implement the strategy while adhering to the budget ceiling. The contractor must be familiar with Bolivian government official protocol and must become familiar with US Government rules and regulations as regards to communications products.

The contractor should have significant expertise in crafting information messages in various media formats (press releases, websites, cables, etc.) targeting a variety of audiences and experience in planning public outreach events. The contractor must have good written and oral communication skills in Spanish as well as English. The contractor must be responsive to direction and instructions offered by USAID/Bolivia.

Staff must demonstrate knowledge or the ability to access extensive information about child health and survival, maternal and reproductive health, family planning, HIV/AIDS, other infectious diseases, and health systems.

III. Deliverables and Performance

A. Deliverables

To successfully comply with the contract terms, the contractor will deliver:

1. A public information plan covering the period from the contract initiation date through September 2010. The plan should respond to the findings of the gap analysis (*though the gap analysis is not a separate deliverable; findings should be presented in the introduction to the public information plan*). It should include, but is not limited to: clearly defined communication goals and objectives of the program, event, or publication; specific communication products (e.g. success stories, newsletters, press releases, newspaper supplements, public events, etc.) to be created by HSOT partners and/or the contractor; and intended target audience, message, deadlines and responsible entity for each product. A specific format will be agreed upon between the Contractor and USAID/Bolivia.
2. A branding and marking plan that meets USAID requirements. See web site: <http://www.usaid.gov/branding/>
3. A standard information package on the USAID/Bolivia HSOT program for briefings and for distribution to the Bolivian public and the media, USAID/Washington, the U.S. Embassy, and other agencies. Materials may include program briefing papers, project status reports, maps, photos and general information about Bolivia that is relevant to the health program. The package will be updated periodically.
4. Assistance in the crafting and organization (including preparing scene setters) of approximately 20 public events (to be carried out/financed by HSOT implementing partners) that include media coverage to ensure that targeted stakeholders are aware of program impact and the US Government involvement. It is estimated that this could consist of three large events, ten medium events and seven small events during the entire period of the contract. Events should be coordinated with USAID/Bolivia's Program Office to make sure that the plans are consistent and complementary with the Mission's and the Embassy's initiatives
5. Direct organization of public events highlighting HSOT programs and contributions to the health sector in Bolivia. At least 1 large event and 1 medium event will be organized per year, including event conceptualization, design and dissemination of invitations and promotional materials, organization of logistical support, contacting press and managing press coverage, etc.
6. At least one draft press release/month highlighting the success of a USAID/Bolivia-funded health activity to ensure that targeted stakeholders are aware of program impact and the US Government involvement.

7. At least one success story/month published a range of potential Spanish or English speaking publications to ensure that targeted stakeholders are aware of program impact and the US Government involvement.
8. Technical assistance to USAID/Bolivia and/or its partners to ensure that public information strategy goals are achieved. This may entail assistance in maintaining a calendar of USAID program events in close coordination with implementing partners, assistance to both USAID and implementing partners in message development and identification, introduction to local and international media outlets (print, radio or TV) for reaching public with messages, follow up with media to encourage and support coverage of public events, event planning assistance, support for improved web-page conceptualization and design, etc.
9. Two two-day training workshops for the media to improve health reporting.
10. Two training sessions for USAID HSOT and implementing partner staff to improve their ability to interact effectively with the media.

B. Reporting Requirements

The contractor will submit the reports described below to the USAID/Bolivia CTO. The exact format for preparation of all reports will be determined in collaboration with the CTO.

1. Initial and annual work plan(s): Within 45 days of contract award, and annually thereafter on October 30, the Contractor will submit for CTO approval a work plan describing the activities anticipated during the period from October 1 to September 30. The plan shall detail the proposed activities, calendar, and allocations of human and financial resources and overall strategy for that contract year. This work plan will be updated during the year as required. No activities shall be conducted without prior approval by the CTO as part of a work plan (as amended).
2. Quarterly expenditure reports: Within 30 days of the end of the first calendar quarter after award, and each quarter thereafter, the Contractor shall submit to the CTO a quarterly expenditure report showing current and cumulative information relating to actual project expenditures. The report shall also project expenditures for the remainder of the contract period.
3. Semi-Annual progress reports: The Contractor shall prepare and submit semi-annual progress reports due six months after the contract award, and every six months thereafter. These shall describe the work accomplished and its relationship to the work plan. They shall also identify gaps in performance, the reason for these gaps, and steps taken to address any problems.

4. Final report: Ninety days after the completion date of this contract, the contractor will submit a final report that includes: an executive summary of the contractor's accomplishments and conclusions about areas in need of future assistance, an overall description of the Contractor's activities and attainment of results during the life of the contract, significance of these results and activities, important lessons learned; comments and recommendations, and a fiscal report that describes how the Contractor's funds were used.

C. Special Performance Requirements

The Contractor shall satisfy the following special requirements:

1. Ensure that the CTO is fully informed regarding the status of project activities.
2. Meet regularly with the CTO to discuss and review activities, implementation and management issues, and financial and budget status. The frequency and schedule of meetings will be decided by the CTO and the COP and is subject to change.
3. Ensure quick turn around, often within 24 hours, of urgent *ad hoc* requests.
4. Maintain appropriate and effective working relationships with designated HSOT staff.
5. Coordinate effectively with other HSOT-funded implementing partners.
6. Coordinate effectively the USAID/Program Office's Development Outreach Coordinator to ensure that s/he is aware of contract implementation and public diplomacy issues.
7. Coordinate effectively and as appropriate with other donors and private sector entities active in the health sector in Bolivia.

IV. Instructions to Bidders

Based on USAID/Bolivia's website, the Strategic Plan for Health, and on documentation concerning the Health Office's Rural Health Strategy, we well as on information in the above Scope of Work, bidders should present:

- their vision and overall approach for the contract;
- an illustrative public information plan for the life of the contract, including specific outreach and media activities that are responsive to the specified deliverables and the rationale for selecting those activities;
- an illustrative first year work plan;
- an outline for a press release;
- a schedule for a community event and outlines of the accompanying publicity materials;
- a schedule and outline of curricula for a 2-day workshop to train print reporters to more effectively cover health issues; and
- a suggested M&E plan for the contract.

With regard to staffing, in its proposal, the bidder shall:

- provide a full staffing plan, including lines of authority and responsibilities of each staff person;
- propose and justify the configuration of staff positions;
- provide a matrix of all personnel and the relevant skills they bring to the performance of this Scope of Work, indicating major priority and on-demand competencies; and
- provide a brief (2-3) page resume for key proposed personnel.

Up to five positions may be designated as key personnel by USAID, requiring USAID approval.

In addition, bidders should explain how they will engage the cooperation of HSOT implementing partners. Bidders should also suggest how they would modify, if at all, the existing information on the website and in the Rural Health Strategy packet to be more effective for communicating with: a) Bolivian policy makers at the central and regional levels; b) stakeholders at the municipal level; c) other donors and health organizations, and d) community members.

Changes to Statement of Work

Any changes to this statement of work shall be authorized and approved only through written correspondence from the Acquisition and Assistance Officer. A copy of each change will be kept in a project folder along with all other products of the project. Costs incurred by the contractor through the actions of parties other than the Acquisition and Assistance Officer shall be borne by the contractor.

KEY INDIVIDUAL CERTIFICATION
NARCOTICS OFFENSES AND DRUG TRAFFICKING

I hereby certify that within the last ten years:

1. I have not been convicted of a violation of, or a conspiracy to violate, any law or regulation of the United States or any other country concerning narcotic or psychotropic drugs or other controlled substances.
2. I am not and have not been an illicit trafficker in any such drug or controlled substance.
3. I am not and have not been a knowing assistor, abettor, conspirator, or colluder with others in the illicit trafficking in any such drug or substance.

Signature:

Date:

Name:

Title/Position:

Organization:

NOTICE:

1. **You are required to sign this Certification under the provisions of 22 CFR Part 140, Prohibition on Assistance to Drug Traffickers. These regulations were issued by the Department of State and require that certain key individuals of organizations must sign this Certification.**
2. **If you make a false Certification you are subject to U.S. criminal prosecution under 18 U.S.C. 1001.**

ORGANIZATIONAL CONFLICTS OF INTEREST REPRESENTATION

1. (a) The offeror represents, to the best of its knowledge and belief, that the award to it of a contract or the modification of an existing contract does [] or does not [] involve an organizational conflict of interest.

(b) The term "organizational conflict of interest" means that a relationship exists whereby an offeror or a Contractor (including its chief executives, directors, proposed consultants or subcontractors) has interest which (A) may diminish its capacity to give impartial, technically sound, objective assistance and advice or may otherwise result in a biased work product, or, (B) may result in an unfair competitive advantage. It does not include the normal flow of benefits from the performance of a contract.

(c) The term "Contractor" means that there are organizational conflicts of interest in the "Organizational Conflicts of Interest Representation", the offeror shall provide a statement which describes in a concise manner all relevant facts concerning any present or current planned interest (financial, contractual, organizational, or otherwise) relating to the work to be performed in the proposed contract and bearing on whether the offeror has a possible organizational conflict of interest with respect to being able to render impartial, technically sound, and objective assistance or advice, or being given an unfair competitive advantage. The offeror may also provide relevant facts that show how its organizational structure and/or management systems limit its knowledge of possible organizational conflicts of interest relating to other divisions or sections of the organization and how that structure or system would eliminate or neutralize such organizational conflict.

Name of Offeror/Contractor

BY:

Signature

NAME:

Typed or Printed Name of Authorized Official

DATE:

EVALUATION CRITERIA

Each proposal will be scored by a technical evaluation committee using the criteria shown in this section.

I. TECHNICAL PROPOSAL (100 Points)

Technical proposals will be evaluated against the following criteria:

- A. Technical Approach (45 points): Content and approach of the proposal including: coherence of proposed approach; creativity and innovativeness; responsiveness to the Scope of Work; feasibility, reasonableness, and likely impact of proposed communications activities.
- B. Staffing (40 points): Qualifications of key personnel, qualifications and adequacy of project team, efficiency of management and staffing structures.
- C. Institutional past performance (15 points): Institutional communication expertise, prior experience implementing public information activities in the Bolivian context, satisfactory past performance references.

II. COST PROPOSAL (0 points)

Validity of Costs as Proposed by the Offeror: This evaluates the Offeror's proposed costs in relation to the proposed technical effort and with respect to the Offeror's understanding of the statement of work's requirements.

GENERAL INSTRUCTIONS TO OFFERORS

1. Proposals are limited to 10 pages (excluding annexes), OVER 10 PAGES WILL NOT, REPEAT NOT, BE EVALUATED, and shall be written in either English or Spanish and typed on standard 8 1/2" x 11" paper (210 mm by 297mm paper), single spaced, 10 characters per inch with each page numbered consecutively. The winner final revised proposal shall be written in English. Items such as graphs, charts, cover pages, dividers, table of contents, and attachments are not included in the 10-page limitation.

2. Interested offerors should submit the proposal either:

(i) electronically - internet email to aaoproposals@usaid.gov with attachments (2MB limit) compatible with MS WORD, MSeXcel, in a MS Windows environment. Only those pages requiring original manual signatures should be sent via facsimile. (Facsimile of the entire proposal is **not** authorized); or

(ii) via regular mail - sending paper quotation, however the issuing office receives regular international mail only once a week. All mail is subject to US Embassy electronic imagery scanning methods, physical inspection, and is not date and time stamped prior to receipt by USAID and the Contracting Officer; or

(iii) hand delivery (including commercial courier) to the following address:

USAID/Bolivia
Acquisitions and Assistance Office
Natalie J. Thunberg
Contracting Officer
Calle 9, No. 104, Obrajes
La Paz, Bolivia

3. Government Obligation

The US Government is not obligated to make an award or to pay for any costs incurred by the offeror in preparation of a proposal in response hereto.

CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET

1. Name (Last, First, Middle)		2. Contractor's Name	
3. Employee's Address (include ZIP code)		4. Contract Number	5. Position Under Contract
		6. Proposed Salary	7. Duration of Assignment
8. Telephone Number (include area code)	9. Place of Birth	10. Citizenship (If non-U.S. citizen, give visa status)	

1. Names, Ages, and Relationship of Dependents to Accompany Individual to Country of Assignment

12. EDUCATION (include all college or university degrees)				13. LANGUAGE PROFICIENCY		
NAME AND LOCATION OF INSTITUTION	MAJOR	DECREE	DATE	LANGUAGE	Proficiency Speaking	Proficiency Reading

14. EMPLOYMENT HISTORY

1. Give last three (3) years. List salaries separate for each year. Continue on separate sheet of paper if required to list all employment related to duties of proposed assignment.
2. Salary definition – basic periodic payment for services rendered. Exclude bonuses, profit-sharing arrangements, commissions consultant fees, extra or overtime work payments, overseas differential or quarters, cost of living or dependent education allowances.

POSITION TITLE	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #	Dates of Employment (mm/dd/yyyy)		Annual Salary
		From	To	Dollars

15. SPECIFIC CONSULTANT SERVICES (give last three (3) years)

SERVICES PERFORMED	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #	Dates of Employment (mm/dd/yyyy)		Days at Rate	Daily Rate In Dollars
		From	To		

16. CERTIFICATION: To the best of my knowledge, the above facts as stated are true and correct.

Signature of Employee		Date
Contractor certifies in submitting this form that it has taken reasonable steps (in accordance with sound business practices) to verify the information contained in this form. Contractor understands that USAID may rely on the accuracy of such information in negotiating and reimbursing personnel under this contract. The making of certifications that are false, fictitious, or fraudulent, or that are based on inadequately verified information, may result in appropriate remedial action by USAID, taking into consideration all of the pertinent facts and circumstances, ranging from refund claims to criminal prosecution.		
Signature of Contractor's Representative		Date

INSTRUCTIONS

Indicate your language proficiency in block 13 using the following numeric interagency Language Roundtable levels (Foreign Service Institute levels). Also, the following provides brief descriptions of proficiency levels 2, 3, 4, and 5. “S” indicates speaking ability and “R” indicates reading ability. For more in-depth description of the levels refer to USAID Handbook 28.

2. Limited working proficiency

S Able to satisfy routine social demands and limited work requirements.

R Sufficient comprehension to read simple, authentic written material in a form equivalent to usual printing or typescript on familiar subjects.

3. General professional proficiency

S Able to speak the language with sufficient structural accuracy and vocabulary to participate effectively in most formal and informal conversations.

R Able to read within a normal range of speed and with almost complete comprehension.

4. Advanced professional proficiency

S Able to use the language fluently and accurately on all levels.

R Nearly native ability to read and understand extremely difficult or abstract prose, colloquialisms and slang.

5. Functional native proficiency

S Speaking proficiency is functionally equivalent to that of a highly articulate well-educated native speaker.

R Reading proficiency is functionally equivalent to that of the well-educated native reader.

PAPERWORK REDUCTION ACT INFORMATION

The information requested by this form is necessary for prudent management and administration of public funds under USAID contracts. The information helps USAID estimate overseas logistic support and allowances; the educational information provides an indication of qualifications; the salary information is used as a means of cost monitoring and to help determine reasonableness of proposed salary.

PAPERWORK REDUCTION ACT NOTICE

Public reporting burden for this collection of information is estimated to average thirty minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

United States Agency for International Development
Procurement Policy Division (M/OP/P)
Washington, DC 20523-1435;
and
Office of Management and Budget
Paperwork Reduction Project (0412-0520)
Washington, DC 20503